

FILED

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Attachment 1 - Civil Complaint

WESTERN DISTRICT OF TEXAS

UNITED STATES DISTRICT COURT

WESTERN DISTRICT OF TEXAS

DIVISION

Kenneth Ray Mack

(Enter your full name)

Plaintiff(s)

Austin Police Dept
City of Austin, Texas

(Enter full name of each Defendant)

Defendant(s)

CASE NUMBER:

A17CV 791LY

(To be supplied by Intake Deputy)

COMPLAINT

- ▶ First Paragraph (Name and Address of Plaintiff)
- ▶ Second Paragraph (Name and Address(es) of Defendant(s))
- ▶ Third Paragraph (Jurisdiction Plea).
- ▶ Fourth Paragraph
- ▶ Fifth Paragraph ...

The final paragraph should contain a statement of the relief you are seeking. This paragraph should not be numbered.

Carl R. Mack

Signature

Name (Typed or Printed)

Address

Telephone Number

Kenneth R. Mack
1342 Lamar Square Dr. #311
Austin, Tx 78704

vs
Austin Police Dept
City of Austin, Tx

Now comes the plaintiff in the above styled complaint in the United States Court, Western District of Texas at Austin.

Plaintiff contend his civil rights which are afforded him and guaranteed in the Constitution

Wherefore the plaintiff demand a trial by jury and his day in court.

Plaintiff seek relief by compensatory and punitive damages

Respectfully submitted
Kenneth R. Mack
1342 Lamar Square Dr. #311 78704
512-577-7317

Attachment 9 - U.S. Marshal Form 285 (USM-285)

USM-285 is a 6-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		COURT CASE NUMBER
DEFENDANT		TYPE OF PROCESS
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285
		Number of parties to be served in this case
		Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):		

F-63

F-63

Signature of Attorney or Originator requesting service on behalf of:		<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY— DO NOT WRITE BELOW THIS LINE				
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk
	No. _____	No. _____	No. _____	Date
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below				
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)				
Name and title of individual served (if not shown above)			<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)			Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
			Signature of U.S. Marshal or Deputy	
Service Fee	Total Mileage Charges including <i>endeavors</i>	Forwarding Fee	Total Charges	Advance Deposits
				Amount owed to U.S. Marshal* or (Amount of Refund*)
REMARKS:				

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/80

AO 440 (Rev. 12/09) Summons in a Civil Action

Attachment 8 - Summons Form

UNITED STATES DISTRICT COURT

for the

Western District of Texas

Kenneth R. Mack
Plaintiff

Austin Police Dept.
City of Austin, Texas
Defendant

Civil Action No.

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: _____

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 12/09) Summons in a Civil Action (Page 2)

Civil Action No. _____

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc: